

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

Application or Docket Number

0934708

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY
TYPE

OTHER THAN
SMALL ENTITY

RATE	FEE
<input type="checkbox"/>	395.00
x\$11=	<input type="checkbox"/>
x41=	<input type="checkbox"/>
+135=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>

RATE	FEE
<input type="checkbox"/>	790.00
x\$22=	<input type="checkbox"/>
x82=	<input type="checkbox"/>
+270=	<input type="checkbox"/>
TOTAL	<i>790.00</i>

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL CLAIMS	4	minus 20 = * <input type="checkbox"/>
INDEPENDENT CLAIMS	3	minus 3 = * <input type="checkbox"/>
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE
x\$11=	<input type="checkbox"/>
x41=	<input type="checkbox"/>
+135=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>

RATE	ADDI- TIONAL FEE
x\$22=	<input type="checkbox"/>
x82=	<input type="checkbox"/>
+270=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	<input type="checkbox"/>	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 4	Minus	** 20	= 1
Independent	* 3	Minus	*** 3	= <input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	<input type="checkbox"/>	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* <input type="checkbox"/>	Minus	** <input type="checkbox"/>	= <input type="checkbox"/>
Independent	* <input type="checkbox"/>	Minus	*** <input type="checkbox"/>	= <input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	<input type="checkbox"/>	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* <input type="checkbox"/>	Minus	** <input type="checkbox"/>	= <input type="checkbox"/>
Independent	* <input type="checkbox"/>	Minus	*** <input type="checkbox"/>	= <input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE
x\$11=	<input type="checkbox"/>
x41=	<input type="checkbox"/>
+135=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>

RATE	ADDI- TIONAL FEE
x\$22=	<input type="checkbox"/>
x82=	<input type="checkbox"/>
+270=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.